

POSITION	ID NO.	DATE
CLASSIFIER	10	7-18-95
EXAMINER	230	7-18-95
TYPIST	219	7-18-95
VERIFIER	372	7/17
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

# Best Available Copy INDEX OF CLAIMS

Claim	Date
Final	Original
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

SYMBOLS

✓ Allowed

✗ (Through numeral) Canceled

✗ Restricted

✗ Non-elected

✗ Interference

✗ Appeal

✗ Objected

Claim	Date
Final	Original
17	51
18	52
19	53
20	54
21	55
22	56
23	57
24	58
25	59
26	60
27	61
28	62
29	63
30	64
31	65
32	66
33	67
34	68
35	69
36	70
37	71
38	72
39	73
40	74
41	75
42	76
43	77
44	78
45	79
46	80
47	81
48	82
49	83
50	84
51	85
52	86
53	87
54	88
55	89
56	90
57	91
58	92
59	93
60	94
61	95
62	96
63	97
64	98
65	99
66	100